

DOCKET: 08

IN THE UNITED STATES PATENT & TRADEMARK OFFICE

APPLICANT:	Michael Stuart GARDNER)	Group Art Unit: 3309
SERIAL NO:	08/185,994)	Examiner: G. Dawson
FILING DATE:	March 31, 1994)	Allowed: 03/20/95
TITLE:	EAR TAG APPLICATOR)	Batch No: J84

The Commissioner of Patents & Trademarks
BOX ISSUE FEES
Washington, D.C. 20231

LETTER ACCOMPANYING ISSUE FEE PAYMENT
REGARDING SMALL ENTITY STATUS

Dear Sir:

This is a letter accompanying the issue fee payment.

It is respectfully submitted that a Verified Statement Claiming Small Entity Status in favor of the applicant was filed on April 15, 1994 together with a request for a partial refund of the government filing fee. The Patent Office acknowledged receipt of these materials by date-stamping the return postcard (copies enclosed).

The refund was granted by the Patent Office as shown in the attached copy of applicant's attorney's Monthly Statement of Deposit Account dated July 31, 1994.

It is respectfully submitted that the Patent Office has already acknowledged receipt of the Small Entity Statements of the applicant and therefor the issue fee being paid at this time is being paid at the small entity rate.

However, if the Office believes the applicant is not entitled to claim small entity status, the Commissioner is authorized to charge our Deposit Account No. 12-0400 in the amount of the additional fee required for payment of the issue fee.

A duplicate copy of this letter is attached.

Respectfully submitted,

6/20/95
Date
uspto/6-16/1

Richard J. Streit
Attorney for Applicant

Richard J. Streit, Reg. 25765
c/o Ladas & Parry
224 South Michigan Avenue
Chicago, Illinois 60604
(312) 427-1300

SEE REVERSE FOR SERVICE GUARANTEE,
INSURANCE COVERAGE AND CLAIMS
THANK YOU FOR CHOOSING EXPRESS
MAIL SERVICE.



CUSTOMER RECEIPT

Date: 11/17/77		Postage: \$1.75	
Time In: 1:30 PM	Time Out: 4:30 PM	Return Receipt: <input checked="" type="checkbox"/>	
Weight: 4 lbs	Dimensions: 12x12x12	Insurance: \$1000	
Description of Contents: 1200 S. HIGHICAN AVE. CHICAGO IL 60604-2501		Signature: [Signature]	
Acceptance: <input checked="" type="checkbox"/> By: [Signature]		Postage: \$1.75	
Insurance: <input checked="" type="checkbox"/> By: \$1000		Signature: [Signature]	
Express Mail: <input type="checkbox"/> Priority Mail: <input type="checkbox"/> Registered Mail: <input type="checkbox"/> Signature Required: <input type="checkbox"/>		Signature: [Signature]	
Origin: 1200 S. HIGHICAN AVE. CHICAGO IL 60604-2501		Destination: 1200 S. HIGHICAN AVE. CHICAGO IL 60604-2501	
Express Mail: <input type="checkbox"/> Priority Mail: <input type="checkbox"/> Registered Mail: <input type="checkbox"/> Signature Required: <input type="checkbox"/>		Signature: [Signature]	
Origin: 1200 S. HIGHICAN AVE. CHICAGO IL 60604-2501		Destination: 1200 S. HIGHICAN AVE. CHICAGO IL 60604-2501	
Express Mail: <input type="checkbox"/> Priority Mail: <input type="checkbox"/> Registered Mail: <input type="checkbox"/> Signature Required: <input type="checkbox"/>		Signature: [Signature]	

Ref: Gardner - CU-1108

[illegible]

TO: **212-211-1212** **ext. 211** **Telephone Number** **212-211-1212**
COMMISSIONER OF PATENTS & TRADEMARKS
WASHINGTON, DC 20531-0001

0666 2711 0111 0111 0000

The Patent & Trademark Office acknowledges and has stamped hereon the date of receipt of the items checked below:

- ☐ New pat./design/PCT appln.
☒ Transmittal letter
☐ _____pages spec./abstract
☐ _____pages of _____claims
☐ _____sheets of drawings
☐ Declaration/Power
- ☐ Assignment
☒ Small Entity Statement (3)
☐ CC of priority document
☐ Amendment
☐ Fee
☐ Other

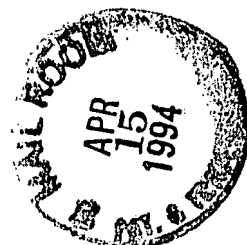
APPLICANT: Michael Stuart Gardner

SERIAL NO 08/185.994

January 31, 1994

EAR TAG APPLICATOR

DOCKET: CU-1108 DATE: 04/15/94



Certification under 37 CFR 1.10

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with The United States Postal Service "Express Mail Post Office to Addressee" Service under 37 CFR 1.10, "Express Mail" Mailing No. TB445777145US on April 15, 1994 and is addressed to The Commissioner of Patents and Trademarks, Washington, D.C. 20231.

Debra M. Szumowski
Name of person mailing paper


Signature of person mailing paper

DOCKET: CU-1108

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT: Michael Stuart GARDNER)
SERIAL NO: 08/185,994)
FILED: January 31, 1994)
TITLE: EAR TAG APPLICATOR)
COMPLETION OF PCT/GB92/01416 FILED 31 JULY 1992)

The Commissioner of Patents & Trademarks
Washington, D.C. 20231

SUBMISSION OF VERIFIED SMALL ENTITY STATEMENT &
REQUEST FOR REFUND UNDER 37 CFR 1.28(a)

Dear Sir:

Enclosed are three Verified Statements Claiming Small Entity Status in connection with the above-identified application.

This request for refund is being made within two months of the date of payment of the surcharge for late filing of the Combined Declaration and Power of Attorney in this application on April 6, 1994.

Please refund one-half of said fee, namely \$65 and credit the same to our Deposit Account No. 12-0400.

A duplicate copy of this request is attached.

Respectfully submitted,

April 15, 1994
Date

252T/6


Attorney for Applicant

Thomas F. Peterson
c/o Ladas & Parry
224 South Michigan Avenue
Chicago, Illinois 60604
Reg. No. 24790

DOCKET: CU-1108

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

☒ In re application of*: Michael Stuart GARDNER

Serial No.: 08/185,994 Group No.:

Filed: January 31, 1994 Examiner:

For*: EAR TAG APPLICATOR

☐ Patent No.: Issued:

*NOTE: Insert name(s) of inventor(s) and title also for patent. Where statement is with respect to a maintenance fee payment also insert application serial number and filing date and add Box M. Fee to address.

VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY STATUS (37 CFR 1.9(c-f) and 1.27(b-d))

With respect to the invention described in

☐ the specification filed herewith.

☒ application serial no. 08/185,994, filed January 31, 1994

☐ patent no. _____, iss. _____

I. IDENTIFICATION OF DECLARANT AND RIGHTS AS A SMALL ENTITY

I hereby declare that I am

(complete either (a), (b), (c) or (d) below):

(a) Independent Inventor

☒ a below named independent inventor and that I qualify as an independent inventor as defined in 37 CFR 1.9(c) for purposes of paying reduced fees under Section 41(a) and (b) of Title 35, United States Code to the Patent and Trademark Office.

(b) Non-inventor Supporting a Claim By Another

☐ making this verified statement to support a claim by

_____ for a small entity status for purposes of paying reduced fees under Section 41(a) and (b) of Title 35, United States Code and I hereby declare that I would qualify as an independent inventor as defined in 37 CFR 1.9(c) for purposes of paying reduced fees under 41(a) and (b) of Title 35, United States Code, if I had made the above identified invention.

(c) Small Business Concern

☐ the owner of the small business concern identified below:

☐ an official of the small business concern empowered to act on behalf of the concern identified below:

NAME OF CONCERN _____

ADDRESS OF CONCERN _____

_____ and

that the above identified small business concern qualifies as a small business concern as defined in 13 CFR 121.3-18, and reproduced in 37 CFR 1.9(d), for purposes of paying reduced fees under Section 41(a) and (b) of the Title 35, United States Code, in that the number of employees of the concern, including those of its affiliates, does not exceed 500

persons. For purposes of this statement, (1) the number of employees of the business concern is the average over the previous fiscal year of the concern of the persons employed on a full-time, part-time or temporary basis during each of the pay periods of the fiscal year, and (2) concerns are affiliates of each other when either, directly or indirectly, one concern controls or has the power to control the other, or a third party or parties controls or has the power to control both.

(d) Non-Profit Organization

- ☐ an official empowered to act on behalf of the nonprofit organization identified below:

NAME OF ORGANIZATION _____

ADDRESS OF ORGANIZATION _____

TYPE OR ORGANIZATION

- ☐ UNIVERSITY OR OTHER INSTITUTION OF HIGHER EDUCATION
- ☐ TAX EXEMPT UNDER INTERNAL REVENUE SERVICE CODE (26 USC 501(a) and 501(c) (3))
- ☐ NONPROFIT SCIENTIFIC OR EDUCATIONAL UNDER STATUTE OF STATE OF THE UNITED STATES OF AMERICA
(NAME OF STATE _____)
(CITATION OF STATUTE _____)
- ☐ WOULD QUALIFY AS TAX EXEMPT UNDER INTERNAL REVENUE SERVICE CODE (26 USC 501(a) and 501(c) (3)) IF LOCATED IN THE UNITED STATES OF AMERICA
- ☐ WOULD QUALIFY AS NONPROFIT SCIENTIFIC OR EDUCATIONAL UNDER STATUTE OF STATE OF THE UNITED STATES OF AMERICA IF LOCATED IN THE UNITED STATES OF AMERICA
(NAME OF STATE _____)
(CITATION OF STATUTE _____)

and that the nonprofit organization identified above qualifies as a nonprofit organization as defined in 37 CFR 1.9(e) for purposes of paying reduced fees under Section 41(a) and (b) of Title 35, United States Code.

II. OWNERSHIP OF INVENTION BY DECLARANT

I hereby declare that rights under contract or law remain with and/or have been conveyed to the above identified

- | | | |
|--|----------------------------------|---------------------------------------|
| <input checked="" type="checkbox"/> person | <input type="checkbox"/> concern | <input type="checkbox"/> organization |
| (item (a) or (b) above) | (item (c) above) | (item (d) above) |

EXCEPT, that if the rights held are not exclusive, each individual, concern or organization having rights to the invention is listed below* and no rights to the invention are held (1) by any person who could not be classified as an independent inventor under 37 CFR 1.9(c) if that person had made the invention, (2) any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or (3) a non-profit organization under 37 CFR 1.9(e).

- ☐ no such person, concern, or organization
- ☒ person, concerns or organizations listed below*

*NOTE: Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities. (37 CFR 1.27).

FULL NAME NEW ZEE INTERNATIONAL
ADDRESS 108 Waiatarua Road, Remuera, Auckland, New Zealand

☐ INDIVIDUAL ☒ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION
FULL NAME MICHAEL HOWARD HAWKINS
ADDRESS 70 Rosecamp Road, Beach Haven, Auckland, New Zealand

☒ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

III. ACKNOWLEDGEMENT OF DUTY TO NOTIFY PTO OF STATUS CHANGE

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))

IV. DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

V. SIGNATURES

(complete only (e) or (f) below)

(e)

NOTE. All inventors must sign the verified statement

Michael Stuart Gardner

Name of Inventor

M. S. Gardner

Signature of Inventor

Date

30th MARCH 1994

Name of Inventor

Date

Signature of Inventor

Name of Inventor

Date

Signature of Inventor

add lines for any additional inventors who must sign

OR

(f)

NOTE: The title of the person signing on behalf of a concern or non-profit organization should be specified.

NAME OF PERSON SIGNING _____

TITLE OF PERSON _____

(if signing on behalf of a concern or non-profit organization)

ADDRESS OF PERSON SIGNING _____

SIGNATURE _____ DATE _____

DOCKET: CU-1108

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

☒ In re application of*: Michael Stuart GARDNER

Serial No.: 08/185,994 Group No.:

Filed: January 31, 1994 Examiner:

For*: EAR TAG APPLICATOR

☐ Patent No.: Issued:

*NOTE: Insert name(s) of inventor(s) and title also for patent. Where statement is with respect to a maintenance fee payment also insert application serial number and filing date and add Box M. Fee to address.

VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY STATUS (37 CFR 1.9(c-f) and 1.27(b-d))

With respect to the invention described in

☐ the specification filed herewith.

☒ application serial no. 08/185,994, filed January 31, 1994

☐ patent no. _____, issued _____

I. IDENTIFICATION OF DECLARANT AND RIGHTS AS A SMALL ENTITY

I hereby declare that I am

(complete either (a), (b), (c) or (d) below):

(a) Independent Inventor

☐ a below named independent inventor and that I qualify as an independent inventor as defined in 37 CFR 1.9(c) for purposes of paying reduced fees under Section 41(a) and (b) of Title 35, United States Code to the Patent and Trademark Office.

(b) Non-Inventor Supporting a Claim By Another

☐ making this verified statement to support a claim by _____

for a small entity status for purposes of paying reduced fees under Section 41(a) and (b) of Title 35, United States Code and I hereby declare that I would qualify as an independent inventor as defined in 37 CFR 1.9(c) for purposes of paying reduced fees under 41(a) and (b) of Title 35, United States Code, if I had made the above identified invention.

(c) Small Business Concern

☐ the owner of the small business concern identified below:

☒ an official of the small business concern empowered to act on behalf of the concern identified below:

NAME OF CONCERN NEW ZEE INTERNATIONAL

ADDRESS OF CONCERN _____

_____ and
that the above identified small business concern qualifies as a small business concern as defined in 13 CFR 121.3-18, and reproduced in 37 CFR 1.9(d), for purposes of paying reduced fees under Section 41(a) and (b) of the Title 35, United States Code, in that the number of employees of the concern, including those of its affiliates, does not exceed 500

persons. For purposes of this statement, (1) the number of employees of the business concern is the average over the previous fiscal year of the concern of the persons employed on a full-time, part-time or temporary basis during each of the pay periods of the fiscal year, and (2) concerns are affiliates of each other when either, directly or indirectly, one concern controls or has the power to control the other, or a third party or parties controls or has the power to control both.

(d) Non-Profit Organization

- ☐ an official empowered to act on behalf of the nonprofit organization identified below:

NAME OF ORGANIZATION _____

ADDRESS OF ORGANIZATION _____

TYPE OF ORGANIZATION

- ☐ UNIVERSITY OR OTHER INSTITUTION OF HIGHER EDUCATION
- ☐ TAX EXEMPT UNDER INTERNAL REVENUE SERVICE CODE (26 USC 501(a) and 501(c) (3))
- ☐ NONPROFIT SCIENTIFIC OR EDUCATIONAL UNDER STATUTE OF STATE OF THE UNITED STATES OF AMERICA
(NAME OF STATE _____)
(CITATION OF STATUTE _____)
- ☐ WOULD QUALIFY AS TAX EXEMPT UNDER INTERNAL REVENUE SERVICE CODE (26 USC 501(a) and 501(c) (3)) IF LOCATED IN THE UNITED STATES OF AMERICA
- ☐ WOULD QUALIFY AS NONPROFIT SCIENTIFIC OR EDUCATIONAL UNDER STATUTE OF STATE OF THE UNITED STATES OF AMERICA IF LOCATED IN THE UNITED STATES OF AMERICA
(NAME OF STATE _____)
(CITATION OF STATUTE _____)

and that the nonprofit organization identified above qualifies as a nonprofit organization as defined in 37 CFR 1.9(e) for purposes of paying reduced fees under Section 41(a) and (b) of Title 35, United States Code.

II. OWNERSHIP OF INVENTION BY DECLARANT

I hereby declare that rights under contract or law remain with and/or have been conveyed to the above identified

- | | | |
|---------------------------------|---|---------------------------------------|
| <input type="checkbox"/> person | <input checked="" type="checkbox"/> concern | <input type="checkbox"/> organization |
| (item (a) or (b) above) | (item (c) above) | (item (d) above) |

EXCEPT, that if the rights held are not exclusive, each individual, concern or organization having rights to the invention is listed below* and no rights to the invention are held (1) by any person who could not be classified as an independent inventor under 37 CFR 1.9(c) if that person had made the invention, (2) any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or (3) a non-profit organization under 37 CFR 1.9(e).

- ☐ no such person, concern, or organization
- ☒ person, concerns or organizations listed below*

*NOTE: Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities. (37 CFR 1.27).

FULL NAME MICHAEL HOWARD HAWKINS
ADDRESS 70 Rosecamp Road, Beach Haven, Auckland, New Zealand

☒ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

FULL NAME MICHAEL STUART GARDNER
ADDRESS 108 Waiatarua Road, Remuera, Auckland, New Zealand

☒ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

III. ACKNOWLEDGEMENT OF DUTY TO NOTIFY PTO OF STATUS CHANGE

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))

IV. DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

V. SIGNATURES

(complete only (e) or (f) below)

(e)

NOTE: All inventors must sign the verified statement

Name of Inventor _____

Date _____

Signature of Inventor _____

Name of Inventor _____

Date _____

Signature of Inventor _____

Name of Inventor _____

Date _____

Signature of Inventor _____

add lines for any additional inventors who must sign

OR

(f)

NOTE: The title of the person signing on behalf of a concern or non-profit organization should be specified.

NAME OF PERSON SIGNING MICHAEL STUART GARDNER

TITLE OF PERSON Director

(if signing on behalf of a concern or non-profit organization)

ADDRESS OF PERSON SIGNING 108 Waiatarua Road, Remuera,
Auckland, New Zealand

SIGNATURE

X MSGardner

DATE

X 30th MARCH 1994

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

☒ In re application of: Michael Stuart GARDNER

Serial No.: 08/185,994 Group No.:

Filed: January 31, 1994 Examiner:

For EARTAG APPLICATOR

☐ Patent No.: Issued:

*NOTE: Insert name(s) of inventor(s) and title also for patent. Where statement is with respect to a maintenance fee payment also insert application serial number and filing date and add Box M. Fee to address.

VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY STATUS (37 CFR 1.9(c-f) and 1.27(b-d))

With respect to the invention described in

☐ the specification filed herewith.

☒ application serial no. 08/185,994, filed January 31, 1994

☐ patent no. _____, iss. _____

I. IDENTIFICATION OF DECLARANT AND RIGHTS AS A SMALL ENTITY

I hereby declare that I am

(complete either (a), (b), (c) or (d) below):

(a) Independent Inventor

☐ a below named independent inventor and that I qualify as an independent inventor as defined in 37 CFR 1.9(c) for purposes of paying reduced fees under Section 41(a) and (b) of Title 35, United States Code to the Patent and Trademark Office.

(b) Non-inventor Supporting a Claim By Another

☒ making this verified statement to support a claim by
Michael Stuart Gardner

for a small entity status for purposes of paying reduced fees under Section 41(a) and (b) of Title 35, United States Code and I hereby declare that I would qualify as an independent inventor as defined in 37 CFR 1.9(c) for purposes of paying reduced fees under 41(a) and (b) of Title 35, United States Code, if I had made the above identified invention.

(c) Small Business Concern

☐ the owner of the small business concern identified below:

☐ an official of the small business concern empowered to act on behalf of the concern identified below:

NAME OF CONCERN _____

ADDRESS OF CONCERN _____

_____ and

that the above identified small business concern qualifies as a small business concern as defined in 13 CFR 121.3-18, and reproduced in 37 CFR 1.9(d), for purposes of paying reduced fees under Section 41(a) and (b) of the Title 35, United States Code, in that the number of employees of the concern, including those of its affiliates, does not exceed 500

persons. For purposes of this statement, (1) the number of employees of the business concern is the average over the previous fiscal year of the concern of the persons employed on a full-time, part-time or temporary basis during each of the pay periods of the fiscal year, and (2) concerns are affiliates of each other when either, directly or indirectly, one concern controls or has the power to control the other, or a third party or parties controls or has the power to control both.

(d) Non-Profit Organization

- ☐ an official empowered to act on behalf of the nonprofit organization identified below:

NAME OF ORGANIZATION _____

ADDRESS OF ORGANIZATION _____

TYPE OR ORGANIZATION

- ☐ UNIVERSITY OR OTHER INSTITUTION OF HIGHER EDUCATION
- ☐ TAX EXEMPT UNDER INTERNAL REVENUE SERVICE CODE (26 USC 501(a) and 501(c) (3))
- ☐ NONPROFIT SCIENTIFIC OR EDUCATIONAL UNDER STATUTE OF STATE OF THE UNITED STATES OF AMERICA
(NAME OF STATE _____)
(CITATION OF STATUTE _____)
- ☐ WOULD QUALIFY AS TAX EXEMPT UNDER INTERNAL REVENUE SERVICE CODE (26 USC 501(a) and 501(c) (3)) IF LOCATED IN THE UNITED STATES OF AMERICA
- ☐ WOULD QUALIFY AS NONPROFIT SCIENTIFIC OR EDUCATIONAL UNDER STATUTE OF STATE OF THE UNITED STATES OF AMERICA IF LOCATED IN THE UNITED STATES OF AMERICA
(NAME OF STATE _____)
(CITATION OF STATUTE _____)

and that the nonprofit organization identified above qualifies as a nonprofit organization as defined in 37 CFR 1.9(e) for purposes of paying reduced fees under Section 41(a) and (b) of Title 35, United States Code.

II. OWNERSHIP OF INVENTION BY DECLARANT

I hereby declare that rights under contract or law remain with and/or have been conveyed to the above identified

☒ person ☐ concern ☐ organization
(item (a) or (b) above) (item (c) above) (item (d) above)

EXCEPT, that if the rights held are not exclusive, each individual, concern or organization having rights to the invention is listed below* and no rights to the invention are held (1) by any person who could not be classified as an independent inventor under 37 CFR 1.9(c) if that person had made the invention, (2) any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or (3) a non-profit organization under 37 CFR 1.9(e).

- ☐ no such person, concern, or organization
- ☒ person, concerns or organizations listed below*

*NOTE: Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities. (37 CFR 1.27).

FULL NAME NEW ZEE INTERNATIONAL
ADDRESS _____

☐ INDIVIDUAL ☒ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION
FULL NAME Michael Stuart GARDNER
ADDRESS _____

☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

III. ACKNOWLEDGEMENT OF DUTY TO NOTIFY PTO OF STATUS CHANGE

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))

IV. DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

V. SIGNATURES

(complete only (e) or (f) below)

(e)

NOTE: All inventors must sign the verified statement

Name of inventor

Date

Signature of inventor

Name of inventor

Date

Signature of inventor

Name of inventor

Date

Signature of inventor

add lines for any additional inventors who must sign

OR

(f)

NOTE: The title of the person signing on behalf of a concern or non-profit organization should be specified.

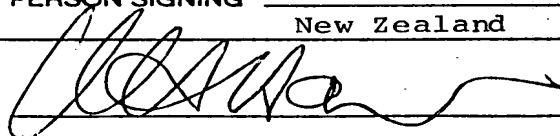
NAME OF PERSON SIGNING Michael Howard Hawkins

TITLE OF PERSON _____

(if signing on behalf of a concern or non-profit organization)

ADDRESS OF PERSON SIGNING 70 Rosecamp Road, Auckland,
New Zealand

SIGNATURE



DATE _____



MONTHLY STATEMENT OF DEPOSIT ACCOUNT

To replenish your Deposit Account, detach and return top portion with your check. Make check payable to Commissioner of Patents & Trademarks.

LADAS & PARRY
224 S MICHIGAN AVENUE
CHICAGO ILLINOIS 60604

FINA

Address: COMMISSIONER OF PATENTS AND TRADEMARKS
Washington, D.C. 20231

Account No.	12-0400
Date	07-31-94
Page	1

PLEASE SEND REMITTANCES TO:
Patent and Trademark Office
P.O. Box 70541
Chicago, Ill. 60673

DATE POSTED			CONTROL NO.	DESCRIPTION (Serial, Patent, TM, Order)	DOCKET NO.	FEE CODE	CHARGES	CREDITS	BALANCE
MO.	DAY	YR.							
7	1	94	11056	08049216		567	4800		240507
7	1	94	19173	PCT/US94/06983		566	1200		239307
7	1	94	15043	07910350		561	OK 3000		236307
7	5	94	20032	29015122		566	2000		234307
7	7	94	15010	93-32		464	1000		233307
7	7	94	14566	07892185		561	OK 3000		230307
7	7	94	14567	08078620		561	OK 3000		227307
7	7	94	20250	29015071		567	1200		226107
7	8	94	19005	PCT/US94/07241		566	2400		223707
7	11	94	10120	29015068		567	2400		221307
7	11	94	20234	08183870		567	2400		218907
7	15	94	30157	08089323		567	2400		216507
7	18	94	30711	PAYMENT		701		300000	516507
7	19	94	30255	08088994		567	2400		514107
7	19	94	30267	08087569		567	2400		511707
7	19	94	30385	08078995		566	3600		508107
7	20	94	20073	PCT/US94/07539		566	1200		506907
7	25	94	18078	08185944	5144103065	154	OK 6500	13000-OK	519907
7	25	94	18079	08185994	CU1108TFP	254			513407
7	25	94	15192	1599702		369	10000		503407
7	27	94	20238	08021540		567	2400		501007
7	28	94	20199	08063377		567	2400		498607
AN AMOUNT SUFFICIENT TO COVER ALL SERVICES REQUESTED MUST ALWAYS BE ON DEPOSIT.						OPENING BALANCE	TOTAL CHARGES	TOTAL CREDITS	CLOSING BAL
						245307	59700	313000	498607

*** O.D. INDICATES OVERDRA